IOWA DEPARTMENT OF AGRICULTURE & LAND STEWARDSHIP	**APPLICATION FOR STATE PROVIDED EID EQUIPMENT (WAND READERS)**

APPLICANT INFORMATION

Livestock Market:

Owner / Manager:

Address:

City:	State:	ZIP Code:

Office Phone:	Cell Phone:	Email:

IDALS will have an open application period for V*eterinarians* that sell cattle that require electronic identification (EID). The availability of readers is limited; readers will be awarded by a selection committee based on the following criteria:

Please answer:
- Have you previously received a reader from our office?
- Are you aware of the USDA rule that went in effect November 5th, 2024, EID tags are required for cattle & bison? Click or tap here to enter text.
  https://www.aphis.usda.gov/livestock-poultry-disease/traceability
- Do your producers/clients use EID tags? Click or tap here to enter text.
- How would you specifically use the reader? Click or tap here to enter text.

DISTRUBUTION OF EID READERS

- Readers will be provided at no cost with the selected applicant. The applicant will take ownership, retain custody of the reader and all cost of maintaining reader is that of the applicant. Please follow the user manual to maintain equipment for optimum use.

- An initial application period will be open **June 6th, 2025.** Applications may be submitted and will be considered based on reader availability. Applications must be received by IDALS no later than June 20th**, 2025**. IDALS reserves the right to extend this date based on reader availability and program participation.

EQUIPMENT DESCRIPTION (OFFICE USE)

☐ SRS2i Stick Reader, Model # 880 0004-657 Serial #_____

Quickly and easily read, record, and transfer EID tag information with the Tru-Test SRS2i Electronic ID reader. The large, highly readable screen displays the session count, EID numbers, and you can pre-load Visual Identification (VID) numbers. Visit https://us.tru-test.com/products/eid-readers/srs2i-stick-reader for more information regarding the SRS2i Sick Reader.

SIGNATURES

Responsible Party

Print Name:	
Signature:	Date: